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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/816,557
	Filing Date	April 1, 2004
	First Named Inventor	Jones, Ronald
	Art Unit	1743
	Examiner Name	Wallenhorst, Maureen
	Attorney Docket Number	52325-8019.US00

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
☐ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

On February 12, 2008 the client requested that this case be transferred to the law firm noted below.

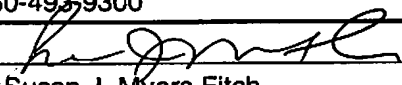
CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number:

OR

☒ Firm or Individual Name Wilson Sonsini Goodrich & Rosati – co/ Maya Skubatch

Address	650 Page Mill Road				
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Telephone	650-493-9300	Email	mskubatch@wsgr.com		
Signature					
Name	Susan J. Myers Fitch		Registration No.	55,477	
Date	26 Feb 2008		Telephone No.	650-838-4300	

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.